# FORM (RF-3)

Change in Company's premium or ra	te level produced by rate revision
effective 10/16/2010	

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private	voiding (initiois)	
٠.	Passenger		
	Commercial		
2	Automobile Physical Damag		
_	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		Annual Control of the
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Motorcycle	\$1,036,769	3.3%
10.	Life of Insurance	\$1,030,709	3.3 /6
•	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		
	specify: No		
	Brief description of filing. (If fi Organization, specify	ling follows rates of an ad	dvisory
	organization):	Revising base rates, te	rritory definitions and factors,
	increased limit factors, and deducti	ble factors. Introducing mode	el year rating, new discounts,
	paid in full discount, and minimum	premium of \$100.	
	*Adjusted to reflect all prior ra **Change in Company's prem		t from application of new
	rates.		
		AMCO Insurance C	Company
		Nar	me of Company
			n, Product Manager
		(	Official – Title

Chan	ge in Company's premium or rate le	vel produced by rate revision effective	06/12/2010
	(1) <u>Coverage</u>	(2) Annual Premium Volum <u>e (Illinois)*</u>	(3) Percent Change (+ or -)**
		volume (minolo)	Oridingo (
1.	Automobile Liability		
	Private Passenger Commercial		
2.	Automobile Physical Damage		
۷.	Private Passenger		
	Commercial		· · · · · · · · · · · · · · · · · · ·
3.	Liability Other Than Auto	\$70,059	0.00%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$534,412	8.98%
10.	Extended Coverage	\$195,443	19.05%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Optional Coverages	\$20,588	21.95%
	Line of Insurance		
Does No	filing only apply to certain territory (t	erritories) or certain classes? If so, s	pecify:
Appl	ication of current expense multiplier		ecify organization):
Adju	stment factor for fire coverage to ter	ritory 04 and 05;	
*Impa	cts include rate change only they do	not include impact from scorecard ch	nange
		Amer Comp	ican Economy Insurance pany Name of Company
			Collison, Product Manager Official - Title

#### **SUMMARY SHEET**

Chang	e in Company's premium or rate le	vel produced by rate revision effec	tive <u>06/12/2010</u>
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$60,011	0.00%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		0.740/
9.	Fire	\$435,297	8.71%
10.	Extended Coverage	\$165,957	19.27%
11.	Inland Marine		
12.	Homeowners		
13. 14.	Commercial Multi-Peril Crop Hail		- T - NO.
14. 15.	Other Optional Coverages	\$21,687	22.06%
13.	Line of Insurance	Ψ21,007	22.0070
Does fi No	ling only apply to certain territory (t	territories) or certain classes? If so	o, specify:
Brief d	escription of filing. (If filing follows	rates of an advisory organization,	specify organization):
Applic	cation of current expense multiplier	, modifiers and	
Adjus	tment factor for fire coverage to ter	rritory 04 and 05;	
*Impac	ts include rate change only they do	o not include impact from scorecar	d change
			merican States Insurance
			ompany Name of Company
			Name of Company

#### **SUMMARY SHEET**

Chang	(1)	el produced by rate revision effective  (2)  Annual Premium	06/12/2010 (3) Percent Change (+ or -)**
	<u>Coverage</u>	Volume (Illinois)*	Change (+ 61 -)
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	\$46,620	0.00%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$375,672	9.76%
10.	Extended Coverage	\$123,654	19.21%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Optional Coverages Line of Insurance	\$13,152	22.50%
Does No	filing only apply to certain territory (te	erritories) or certain classes? If so, spo	ecify:
Appl	description of filing. (If filing follows r ication of current expense multiplier, stment factor for fire coverage to terr		ify organization):

American States Preferred
Insurance Company
Name of Company

<sup>\*</sup>Impacts include rate change only they do not include impact from scorecard change

#### **SUMMARY SHEET**

ange ii	n Company's premium or rate level produce	ed by rate revision effective:	10-03-10
	(1)	(2) Annual Premium	(3) Percent Change
	Coverage	Volume (Illinois)*	(+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Worker's Compensation		
16.	Other Managed Farmowners	\$370,371	+8.3%
10.	Line of Insurance	<del></del>	
filing errito	g only apply to certain territory (territories)	or certain classes? If so, specify:	
	ription of filing. (If filing follows rates of a	n advisory organization, specify	organization):
this	filing we are revising the rates for our Man	aged Farm program.	
hange	to reflect all prior rate changes. in Company's premium level which ult from application of new rates.	COUNTRY Mutual Insurance	e Company
		Rebert a Soni	t
		Richard A. Smith	<u> </u>
		Chief Property/Casualty Act	hio.

Official and Title

#### **SUMMARY SHEET**

Change in	Company's premium or rate level produ	aced by rate revision effective:	10-03-10
	(1)	(2) Annual Premium	(3) Percent Change
	Coverage	Volume (Illinois)*	(+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Worker's Compensation	74,900,000	+4.7%
16.	Other Farmowners	74,900,000	74.76
	Line of Insurance		
_	only apply to certain territory (territories	s) or certain classes? If so, specify:	
All Territor	ies		
Brief descri	ption of filing. (If filing follows rates of	f an advisory organization, specify	organization):
	change, Deductible by Amount of		d a debit/credit progra
	types 25-34, Removed Maximum Ded	uctible Credits.	
	o reflect all prior rate changes.		
	n Company's premium level which		
will resul	t from application of new rates.		
		COUNTRY Mutual Insurance	ce Company
		Name of Company	
		Ocharl a Soni	at.
		Richard A. Smith	-

Official and Title

# FORM (RF-3)

Change in Company's premium or ra	ite level produced by rate revision
effective 10/16/2010	

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		_
	Private Passenger		
_	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
<b>3</b> .	Fidelity		
7.	Surety		
3. '	Boiler and Machinery		
€.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Motorcycle	\$ 199,578	4.2%
	Life of Insurance		
•	Does filing only apply to certai Classes? If so, specify: No	n territory (territories) or o	certain
	Brief description of filing. (If fil Organization, specify organization): increased limit factors, and deductit	Revising base rates, ter	ritory definitions and factors,
	paid in full discount, and minimum p	remium of \$100.	
	*Adjusted to reflect all prior rat  **Change in Company's premi		from application of new
	rates.	Dane 9	
		Depositors Insurance	
			ne of Company
		Brandy Osmundson	n, Product Manager
		. f 1	UHC191 — 1 IUQ

#### **SUMMARY SHEET**

Chang	e in Company's premium or rate lev	vel produced by rate revision effective	06/12/2010
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	\$55,526	0.00%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$411,820	9.21%
10.	Extended Coverage	\$144,588	19.08%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Optional Coverages	\$17,137	22.10%
	Line of Insurance		
Does 1	filing only apply to certain territory (t	erritories) or certain classes? If so, spe	ecify:
Appl	description of filing. (If filing follows ication of current expense multiplier stment factor for fire coverage to ter		ify organization):

\*Impacts include rate change only they do not include impact from scorecard change

First National Insurance
Company of America
Name of Company

1.

2

3. 4. 5: 6. 7. 8. 9. 10. 11. 12.

# Section 754.EXHIBIT A Summary Sheet (Form RF-3)

#### FORM (RF-3)

#### SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
Coverage -	Volume (Illinois) *	Change (+or-) **
itomobile Liability Private		
ssenger		
ommercial		
atomobile Physical Damage		
ivate Passenger		
ommercial		
ability Other Than Auto		
urglary and Theft		
lass		
delity		
ırety		
oiler and Machinery		
re		
xtended Coverage		
land Marine		
omeowners		
ommercial Multi-Peril		
rop Hail		
ther Modified Auto Life of Insurance	\$62,272	-5.3%

enhancements.

Organization, specify organization): We are introducing several coverage

Foremost Insurance Company

Name of Company

David J. Kelly, Assistant Vice President Official - Title

<sup>\*</sup>Adjusted to reflect all prior rate changes.

<sup>\*\*</sup>Change in Company's premium level which will result from application of new rates.

### FORM (RF-3)

Change in	Company's prer	nium or rate	level produced b	by rate revision
	January 1, 20			

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private		
ı.	Passenger		
	Commercial		
2	Automobile Physical Damage		
2.	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
<b>5</b> .	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		-8.1%
15.	Other Antique & Classic Aut Life of Insurance	o \$679,087	-0.1/6
	Does filing only apply to certain to Classes? If so, specify: No.	territory (territories) or cert	ain
:	Brief description of filing. (If filiorganization, specify organization enhancements.	ing follows rates of an advi n): We are introduct	sory ing several coverage
-3. •	*Adjusted to reflect all prior rate **Change in Company's premiur	changes.	om application of new rates.
	**Change in Company's premiur	II ICVCI WIIIOII WIII ICSUII III Foromoet The	urance Company
			me of Company
:			ly, Assistant Vice President
:			Official – Title

#### **SUMMARY SHEET**

Chan	ge in Company's premium or rate lev	vel produced by rate revision effec	tive <u>06/12/2010</u>
	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability		<del></del>
	Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger		
2	Commercial Liability Other Than Auto	\$45,784	0.00%
3. 4.	Burglary and Theft	Ψ-3,70-	
4. 5.	Glass		
5. 6.	Fidelity		
7.	Surety		
7. 8.	Boiler and Machinery		
9.	Fire	\$362,131	8.49%
9. 10.	Extended Coverage	\$139,960	19.13%
11.	Inland Marine	Ψ109,300	
12.			
	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail	\$15,875	20.31%
15.	Other Optional Coverages Line of Insurance	\$10,075	20.5176
Does No	filing only apply to certain territory (t	erritories) or certain classes? If so	o, specify:
App	description of filing. (If filing follows ication of current expense multiplier street factor for fire coverage to ter	, modifiers and	specify organization):
*Impa	cts include rate change only they do	not include impact from scorecar	d change
			eneral Insurance Company of nerica
			Name of Company

#### **SUMMARY SHEET**

Chang	ge in Company's premium or rate lev	rel produced by rate revision effective	06/12/2010
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
^	Commercial		
2.	Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$28,447	0.00%
3. 4.	Burglary and Theft	Ψ20,447	0.0070
4. 5.	Glass		
5. 6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$248,988	10.53%
10.	Extended Coverage	\$71,479	19.03%
11.	Inland Marine	<u> </u>	
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Optional Coverages	\$7,623	28.76%
	Line of Insurance		
Does No	filing only apply to certain territory (te	erritories) or certain classes? If so, sp	ecify:
_			
	description of filing. (If filing follows rication of current expense multiplier,	rates of an advisory organization, spec modifiers and	cify organization):
	stment factor for fire coverage to terr		
*Impa	cts include rate change only they do	not include impact from scorecard cha	ange

Insurance Company of Illinois

Name of Company

# **ILLINOIS DEPARTMENT OF INSURANCE**

Change in Company's premium or rate level	produced by rate revision effective	11/15/10 NB & 12/15/10 RN
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private     Passenger Commercial		
2. Automobile Physical Damage		
3. Liability Other Than Auto		
4. Burglary and Theft		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage 11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Comm General Liability	\$480,302.	11.7%
Line of Insurance	T	
Does filing only apply to certain territory (terr	ritories) or certain classes? If so, specif	fy: <u>N/A</u>
Brief description of filing. (If filing follows rate Office Filing Designation Numbers GL-200 \$400.	es of an advisory organization, specify 8-BGL1 and CF-2008-IALL1 plus min	organization): <u>Insurance Services</u> nimum premium change from \$350. to
*Adjusted to reflect all prior rate changes. **Change in Company's premium level whic		es. Mutual Fire Insurance Company
		Name of Company  A. Collins, Sr. Filing Analyst  Official – Title
		Omdai – Tille

# **ILLINOIS DEPARTMENT OF INSURANCE**

Change in Company's premium or rate le	evel produced by rate revision effective	11/15/10 NB & 12/15/10 RN
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private  Page 1 Commoniel  Page 2 Commoniel  Page 3 Commoniel  Page 3 Commoniel  Page 3 Common		
Passenger Commercial 2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
<ul><li>7. Surety</li><li>8. Boiler and Machinery</li></ul>		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Comm General Liability Line of Insurance	\$1,064,769.	5.2%
Does filing only apply to certain territory	(territories) or certain classes? If so, specify	: <u>N/A</u>
Brief description of filing. (If filing follows Office Filing Designation Numbers GL-\$400.	rates of an advisory organization, specify o 2008-BGL1 and CF-2008-IALL1 plus mini	rganization): <u>Insurance Services</u> mum premium change from \$350. to
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	s. vhich will result from application of new rate	S.
	Nationwide	Mutual Insurance Company Name of Company
	Shirley A.	Collins, Sr. Filing Analyst
		Official – Title

# **ILLINOIS DEPARTMENT OF INSURANCE**

Change in Company's premium or rate le	evel produced by rate revision effective	11/15/10 NB & 12/15/10 RN
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
<ol> <li>Automobile Liability Private         Passenger Commercial</li> <li>Automobile Physical Damage         Private Passenger Commercial</li> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> <li>Glass</li> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Machinery</li> <li>Fire</li> <li>Extended Coverage</li> <li>Inland Marine</li> <li>Homeowners</li> <li>Commercial Multi-Peril</li> </ol>		
14. Crop Hail 15. Other Comm General Liability Line of Insurance	\$753,021.	5.1%
Brief description of filing. (If filing follows	(territories) or certain classes? If so, specify rates of an advisory organization, specify of 2008-BGL1 and CF-2008-IALL1 plus min	organization): Insurance Services
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	rhich will result from application of new rate	s.  rty & Casualty Insurance Company  Name of Company
	Shirley A	. Collins, Sr. Filing Analyst Official – Title

# FORM (RF-3)

Change in Company's premium or ra	te level produced by rate revision
effective 10/16/2010	

-	(1)	(2) Annual Premium	(3) Percent
4	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
_	Commercial		
2	Automobile Physical Damag		•
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Motorcycle	\$ 500,799	5.4%
	Life of Insurance		
•			
	Does filing only apply to certain	n territory (territories) or o	certain
	Classes? If so,		
	specify: No No		
	Brief description of filing. (If fi	ling follows rates of an ad	lvisory
	Organization, specify		
	organization):		ritory definitions and factors,
	increased limit factors, and deductil		
	paid in full discount, Affinity discour	t, and minimum premium of \$	100.
	*Adjusted to reflect all prior ra		
	**Change in Company's prem	ium level which will result	from application of new
	rates.		
			y and Casualty Insurance Co
			ne of Company
		Brandy Osmundson	
		0	fficial – Title

Chan	ge in Company's premium or rate le	vel produced by rate revision effective	e <u>06/12/2010</u>
	(1)	(2) Annual Premium	(3) Percent Change (+ or -)**
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger	-	
_	Commercial		0.00%
3.	Liability Other Than Auto	\$60,679	0.0078
4.	Burglary and Theft		
5.	Glass		
6. 7.	Fidelity		
7. 8.	Surety Boiler and Machinery		
o. 9.	Fire	\$587,126	11.21%
9. 10.	Extended Coverage	\$151,231	18.87%
11.	Inland Marine	<b>4101,201</b>	
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Optional Coverages	\$13,416	24.84%
	Line of Insurance		
Does No	filing only apply to certain territory (	territories) or certain classes? If so, s	specify:
App	lication of current expense multiplier		ecify organization):
Adju	stment factor for fire coverage to te	rritory 04 and 05;	
*Impa	cts include rate change only they d	o not include impact from scorecard c	hange
		Safe Ame	
			Name of Company
		Tim (	Collison, Product Manager Official - Title
			Official - Title

Chang	e in Company's premium or rate lev	el produced by rate revision effec	ctive 06/12/2010
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	\$78,325	0.00%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$565,143	9.15%
10.	Extended Coverage	\$202,934	19.16%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Optional Coverages	\$25,180	21.16%
	Line of Insurance		
Does t	filing only apply to certain territory (t	•	o, specify:
Appli	description of filing. (If filing follows cation of current expense multiplier stment factor for fire coverage to ter	modifiers and	specify organization):
_ Auju	strient factor for life coverage to ter	niory 04 and 05,	
*Impa	cts include rate change only they do	not include impact from scorecar	d change
			afeco Insurance Company of inois
			Name of Company
			m Collison, Product Manager Official - Title

Chang	ge in Company's premium or rate lev	el produced by rate revision effective	06/12/2010
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	0.0000	0.000/
3.	Liability Other Than Auto	\$40,879	0.00%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety .		
8.	Boiler and Machinery	0074 404	7.400/
9.	Fire	\$271,401	7.19%
10.	Extended Coverage	\$121,158_	19.37%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	A	
14.	Crop Hail	0.17.10.1	07.500/
15.	Other Optional Coverages	\$17,181	27.59%
	Line of Insurance		
Does No	filing only apply to certain territory (te	erritories) or certain classes? If so, s	pecify:
Appl	description of filing. (If filing follows r ication of current expense multiplier, estment factor for fire coverage to term	modifiers and	ecify organization):
*Impa	cts include rate change only they do	not include impact from scorecard c	hange
			·
		Safed	co Insurance Company of
		India	
			Name of Company
		Tim (	Collison, Product Manager
			Official - Title

### FORM (RF-3)

#### **SUMMARY SHEET**

	(1)	(2) Annual Premium	(3) Percent
_	Coverage Automobile Liability Private	Volume (Illinois) *	Change (+or-) **
	Passenger		
	Commercial		
	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other Professional Liability	20077	.40.0
	Life of Insurance	30977	+12.9
		im tamitam, (tamitaniaa) ar	aortain
	Does filing only apply to certa Classes? If so,	in terniory (terniones) or	certain
	specify: No		
	specify.		
	Brief description of filing. (If f	iling follows rates of an ac	dvisorv
	Organization, specify		
	organization):	Filing to revise countrywide Co	ommercial and Residential Appraiser Rate
	,		
	*Adjusted to reflect all prior ra **Change in Company's premates		t from application of new
		nium level which will resul	
	**Change in Company's prem	nium level which will resul Star Insurance Cor	

Official - Title